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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).					
I hereby appoint:					
Practitioners associated with the Customer Number:		69693			
OR					
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):					
	Name	Number 1	N	ame	Registration Number
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l			-		
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with					
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3,73(b).					
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:					
[ ra		69693			
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Telephone			Email		
Assignee Name and Address:					
Level 3 Communications, LLC					
1925 Eldorado Boulevard					
Broomfield, Colorado 80021					
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the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the accions.					
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SIGNATURE of Assignee of Record  The inglyicual whose aignature and title is supplied below is authorized to act on behalf of the assignee					
Signature Date by Aug 10 2007.					
Name Robi	ert M. Yates	1		Telephone	100 Bes 122112
1 100	/	·		reselvation &	(MU) 480 6665

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Title

Senior Vice President